

POUND HOUSE NEWS

Spring 2017

PRACTICE UPDATE

www.poundhousepractice.co.uk

The Practice now has a brand new responsive website accessible from any device. This new website is a vast improvement on the old — much easier to navigate and more informative. Do take the time to have a look.

Sadly Dr. Murray has decided to leave the practice. The practice are actively looking to recruit a replacement for Dr. Murray who will be leaving on 30th June.

The practice will be holding a

Bowel Cancer Awareness Day

at the library in Bourne End on Wednesday 14th June 2017. Further details to follow, please check notice boards in the surgery. See Pg 3

Patient Participation Group

The PPG would welcome any comments, feedback or suggestions that you may have. We are your voice. If you would like us to raise an issue with the practice then please get in touch at:

poundhouseppg@gmail.com

CONTENTS

Practice Update	1
DNAs	2
Training Dates	2
Too much on your plate	2
Bowel Cancer Screening	3
Prescription Survey Results	4

DNA 's

During the 3 month period December 16 - February 17 the following appointments were lost as a result of patients not attending.

Doctors 98 Appointments

Nurses 121 Appointments.

We all get frustrated when we can't get an appointment so if you find you no longer need one **PLEASE** let the surgery know—someone else could have it.

Training Days

The surgery will be closed in the afternoon on the following days for staff training.

25 April 2017

16 May 2017

15 June 2017

12 July 2017

Too Much on you Plate?



Probably Yes!

We are constantly reminded of the need to eat healthily, a balanced diet and to be aware of portion size . Its easy to say 1/3 of your plate should be vegetables but here's the thing - **what size is your plate?** In the 1970's a standard size dinner plate was 9 inches. Today a standard size dinner plate is at least

12 inches, often larger. That translates to 50% more surface area; that's

50% larger portions.

Bowel Cancer Screening?

Bowel cancer is a general term for cancer that begins in the large bowel. Depending on where the cancer starts, bowel cancer is sometimes called colon or rectal cancer. The cells in your body normally divide and grow in a controlled way. When cancer develops, the cells change and can grow in an uncontrolled way.

It's the third most common type of cancer in England and most people diagnosed with it are over the age of 60. But bowel cancer can affect people of any age and almost 2500 people under the age of 50 are diagnosed each year. It is the second most common cause of cancer death in the UK, behind lung cancer. But the number of people dying of bowel cancer has been falling since the 1970s. This may be due to earlier diagnosis and better treatment. - including the introduction of the Bowel Cancer Screening Programme for patients between the age of 60 and 74

Taking part in bowel cancer screening is the best way to get diagnosed early

Taking part in bowel cancer screening is the best way to get diagnosed early. It is your choice whether to take part in the screening programme but the benefits of doing so far outweigh the risks of not taking part.

The home test delivered direct to you in the post is quick and easy to use. You use the kit to take small sample of your poo on three separate days. You then pop it back in the post in a prepaid envelope provided. The test primarily looks for hidden blood in your poo. It doesn't diagnose Bowel cancer but can be the catalyst for further tests and investigation.

The results are usually available in around two weeks.

Most people have a normal result which means no blood was found in the sample. In this case you will receive another test in two years time.

If it does show blood you will be invited to your local screening centre for more tests. Blood in you Poo does not mean you Bowel cancer , it can also be a symptom of many other problems which can then be investigated and discussed with your GP.

Even if you have a test with a normal result but are experiencing other symptoms you should still see your GP.

This screening programme is extremely effective — all you have to do is

Put your Poo in the post!

Prescription Survey

Firstly a big thank you to all of you who completed the Prescription Questionnaire. It was very much appreciated. Whilst the number of survey results was quite small in comparison to the number of patients and therefore not truly representative it did prove to be a worthwhile exercise.

Findings

Of the responses received all but 1 were for repeat prescriptions.

Not surprisingly those patients with the larger number of items on their prescription also identified that “not all items are on the prescription” and therefore have the highest incidence of having problems.

Almost half of the patients who identified their problem being “No prescription at the chemist” had either put a repeat in the red box or spoken to a member of staff.

The level of problems identified was the almost identical between the two surgeries at 28% and 29%.

There were two areas of concern that need further investigation as a result of the survey.

- 1 The use of repeat dispensing. It appears that the system does not always cope well for patients with several medications that have been prescribed at different times. Patients tend to request all items on the repeat list for ease and convenience but E.g a medication prescribed in January on two month repeat will not necessarily tie up with a medication prescribed later say July on a two month repeat and therefore will not be dispensed. The more items the greater chance of problems.
2. The practice is to look at the procedure for repeats put into the red box to ensure all staff follow the same steps. It maybe something as simple as pressing the return key on the keyboard that sets the process in motion. Failure to do that may result in no prescription at the chemist.

There were a number of comments on the surveys both good and not so good which have been passed to the practice but it is also important to remember that the number of problems is still relatively small compared to the number of prescriptions issued each week. It is just frustrating if it is you that has the problem.